OCT 3 0 2007 TRADEMAR

Under the Paperwork Reduction Act of 1995, no persons are required		Trademark Office; U.S. DEP	PTO/SB/22 (10-07) 10/31/2007. OMB 0651-0031 PARTMENT OF COMMERCE					
PETITION FOR EXTENSION OF TIME UNDER 3	Docket Number (Optional)							
FY 2006	61154(71699)							
(Fees pursuant to the Consolidated Appropriations Act, 2		Filed September 28, 2006						
Application Number 10/594,874-Conf.	#3239	Filed September 28, 2006						
For BIOMARKERS FOR OVARIAN CANCER								
Art Unit N/A		Examiner No	ot Yet Assigned					
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.								
The requested extension and fee are as follows (check t	ime period desired a	and enter the appropriat	te fee below):					
[]	<u>Fee</u>	Small Entity Fee						
One month (37 CFR 1.17(a)(1))	\$120	\$60	\$					
Two months (37 CFR 1.17(a)(2))	\$460	\$230	\$					
Three months (37 CFR 1.17(a)(3))	\$1050	\$525	\$					
Four months (37 CFR 1.17(a)(4))	\$1640	\$820	\$					
X Five months (37 CFR 1.17(a)(5))	\$2230	\$1115	\$ <u>1,115.00</u>					
Applicant claims small entity status. See 37 CFR 1.27.								
A check in the amount of the fee is enclosed.								
Payment by credit card. Form PTO-2038 is attached.								
X The Director has already been authorized to c	harge fees in this a	application to a Deposi	t Account.					
The Director is hereby authorized to charge an								
Deposit Account Number 04-1105 WARNING: Information on this form may become p		osed a duplicate copy formation should not be in						
Provide credit card Information and authorization of								
I am the applicant/inventor.								
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).								
attorney or agent of record. Reg	gistration Number	53,624	_					
attorney or agent under #7 OFR Registration number iffacting un	.1.34. nder 37 CFR 1.34							
Signature		October 30, 2007 Date						
Jonathan M. Sparks, Ph.D.		(617) 517-5543						
Typed or printed name	Telephone Number							
NOTE: Signatures of all the inventors or assignees of record of the e than one signature is required, see below.	entire interest or their repre	esentative(s) are required. Sub	omit multiple forms if more					
Total of 1 forms are subm	nitted.							

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11/06/2007 GFREY1 00000123 041105 10594874

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PTO/SB/17 (10-07) Approved for use through 06/30/2010. OMB 0651-0032

Under the Paperwoo	rk Reduction Act of 19	95. no person are red	uired to			ark Office; U.S. DEF on unless it displays		
Under the Paperwork Reduction Act of 1995, no person are required to		Complete if Known						
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Application Number 1		10/594,874-Conf. #3259				
FEE TRANSMITTAL		Filing Date		September 28, 2006				
				Daniel W. Chan				
For FY 2008		· mot realised introduction		Not Yet Assigned				
X Applicant claims small entity status. See 37 CFR 1.27			Art Unit		N/A			
TOTAL AMOUNT OF PAYMENT (\$) 1,180.00			Attorney Docket	61154(71699)	71699)			
METHOD OF PAY	/MENT (check a	ll that apply)						
Check C	redit Card	Money Order	No	ne Other (	please identify	۸).		-
	Deposit Account No	J . L		`		The Johns I	Hopkins l	Jniversity
لــا		it account, the Dir	ector is					
i	e fee(s) indicated		00.01	$\overline{}$	•	icated below, ex	cept for t	he filing fee
	e any additional fe under 37 CFR 1.1	e(s) or underpayn 6 and 1 17	nents o	x Credit	any overpa	yments		
FEE CALCULATI		3 4.13						
1. BASIC FILING, SE		AMINATION FEE	s					
	•	ING FEES		ARCH FEES	EXAMIN	IATION FEES		
Annii aation Tuna	F (#)	Small Entity	Fac (\$	Small Entity	Fee (\$)	Small Entity	Food	Date (\$)
Application Type	<u>Fee (\$)</u> 310	<u>Fee (\$)</u> 155	Fee (\$	) <u>Fee (\$)</u> 255	210	<u>Fee (\$)</u> 105	rees	Paid (\$)
Utility Design	210	105	100	50	130	65		
j			310	155	160	80		
Plant	210	105	510	255	620	310		
Reissue	310	155 105	0	0	020	0		
Provisional	210	105	U	U	U	U		Constitution
2. EXCESS CLAIM F	EES						Fee (\$)	Small Entity Fee (\$)
Fee Description Each claim over 20 (	including Reissu	es)					50	25
Each independent cla		•					210	105
Multiple dependent	claims						370	185
Total Claims	Extra Claims	Fee (\$)	Fee I	Paid (\$)	<u>M</u> .	ıltiple Depende	nt Claims	
	x	=			Fe	<u>e (\$)                                      </u>	ee Paid (	<u>\$)</u>
HP = highest number of	total claims paid for, i	f greater than 20.						
Indep. Claims	Extra Claims x	Fee (\$)	Fee I	Paid (\$)				
HP = highest number of	independent claims p	aid for, if greater than	3.					
3. APPLICATION SI	and drawings exc							.0
		ne application size U.S.C. 41(a)(1)(			or smail er	ility) for each ac	iditional 3	00
<u>Total Sheets</u> 112 - 10	Extra Sheets 00 = 12	<u>Number o</u> /50 = 1		dditional 50 or frac				Paid (\$) 125
4. OTHER FEE(S)				(	,			Paid (\$)
Non-English Spe	cification, \$130	fee (no small enti	ty disc	ount)				
Other (e.g., late f	iling_surcharge):	2255 Extension	for re	sponse within fit	fth month		1,1	115.00
COURANTES TO		11						
SUBMITTED BY	Jak Uh	<del>( \</del>		Registration No.	53,624	Telephone	(617) 5°	17-5543
Signature	Zww W	<del>\</del>		(Attorney/Agent)	33,024	<del> </del>	<del>`</del>	
Name (Print/Type)	nathan M. Søari	(\$, Ph.D.				Date	October	30, 2007

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